2011 Military Health System Conference

Medical Response to Haiti Earthquake

Operation Unified Response

The Quadruple Aim: Working Together, Achieving Success

CAPT Michele Hancock, Deputy SG, US Southern Command 24 January 2011









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Agenda

- Background Info
- Mission
- Phases of Support
- Deployment Timeline
- Medical Missions
- International Response
- Lessons Learned





Background Info

- Population: 9,035,536 (approximately 2 million in and around Port-Au-Prince)
- NGOs on the ground for many years, ~3000 in country
 - **Unemployment rate: 65-70%**
 - -- 80% population living under poverty line
 - -- 54% in abject poverty
- Military: Only small Coast Guard (no other forces)



Scope of Disaster

- A Magnitude 7.0 earthquake struck Haiti at 4:53 pm, Tues, Jan 12, 2010
 - -230,000 Deaths*
 - -197,000 Injured
 - 1.1M Displaced People
 - -3,000,000 Affected People
 - -60% of government infrastructure destroyed
 - -14 of 16 MinistryHeadquarters destroyed







Mission Overview

Operation UNIFIED RESPONSE

Mission: JTF-H conducts humanitarian assistance/ disaster relief (HA/DR) operations to support USG efforts in Haiti to mitigate near-term human suffering and accelerate relief efforts to facilitate transition to Government of Haiti, United Nations, and USAID.



Phase I – Emergency Response

- Immediate Life Saving
 - Search and Rescue
 - Care for AMCITS
 - Hospital Assessments
 - Medical CONOPS
 - RSO&I of Medical Personnel
 - Medevacs





Phase II – Relief

- Mitigate Suffering and Meet Basic Needs
 - Specialized surgical care
 - Med Log and blood support
 - Patient transfers off ship
 - Medevacs
 - ➤ Troop FHP





Deployment Timeline (January)

```
AFSOC Arrives
     SJFHQ Arrives
           VINSON Arrives
           B CO, 1/73 CAV (82 ABN) Arrives
                                            EMEDS+10 Arrives
          JTF-B MEDEL Operational
                 BATAAN ARG Arrives
                 First AMC Executed Evacuation
                         COMFORT Arrives
                         AF CCAT & PM-SAT
                         Operational
                            MASF & AELT Arrive
                                      NASSAU ARG Arrives
12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 1 2 3
                          6.1 Aftershock
                                              Evacuation of Haitians
                                              Suspended
           First HHS Personnel Arrive
        First evacuation of Haitian nationals
  Magnitude 7.0 Earthquake vic. Port au Prince
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Deployment Timeline (February)

Decision Made NOT to Employ EMF-150
AE Review Board Established

COMFORT Surg Augments Redeploy

USS VINSON Departs
153rd Blood Support Det Arrives
43rd Veterinary Det Arrives

56th MMB Arrives

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28

Definitive Care Components of NDMS Activated Evacuation of Haitians Resumes **Commercial Flights Resume From PaP**



Deployment Timeline (March)

USTC AE Enablers Redeploy

EMEDS + 10 Redeploys

COMFORT Redeploys

JTF-H Conducts RIP w/ARSOUTH

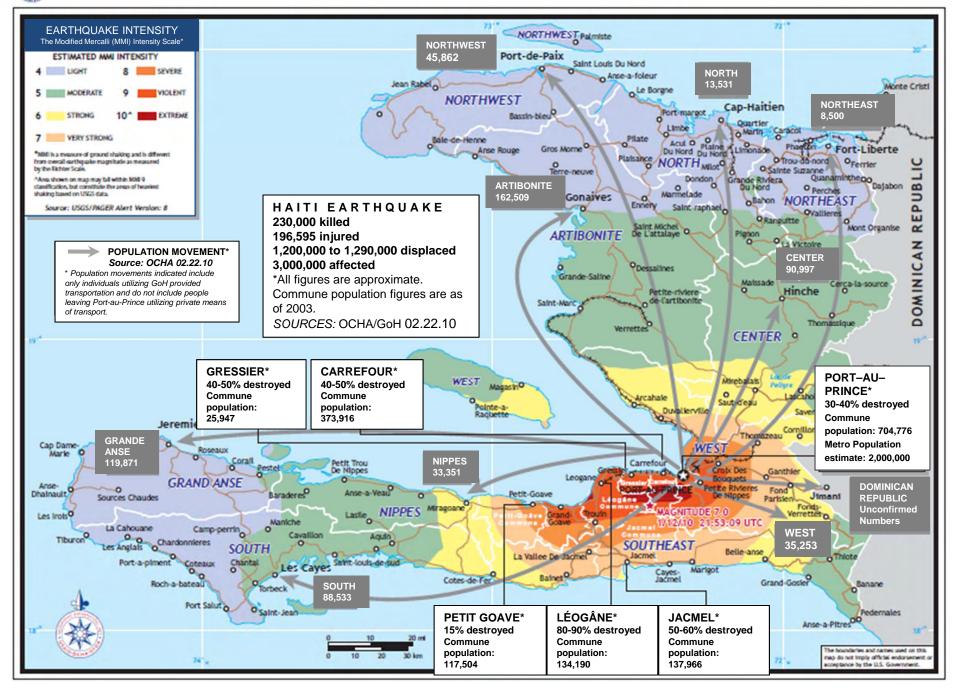
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DHHS Stands Down FCCs

Final DHHS Treatment Asset Redeploys

NDMS Officially Stood Down

EARTHQUAKE-AFFECTED AREAS AND POPULATION MOVEMENT IN HAITI





Afloat Based Medical Support



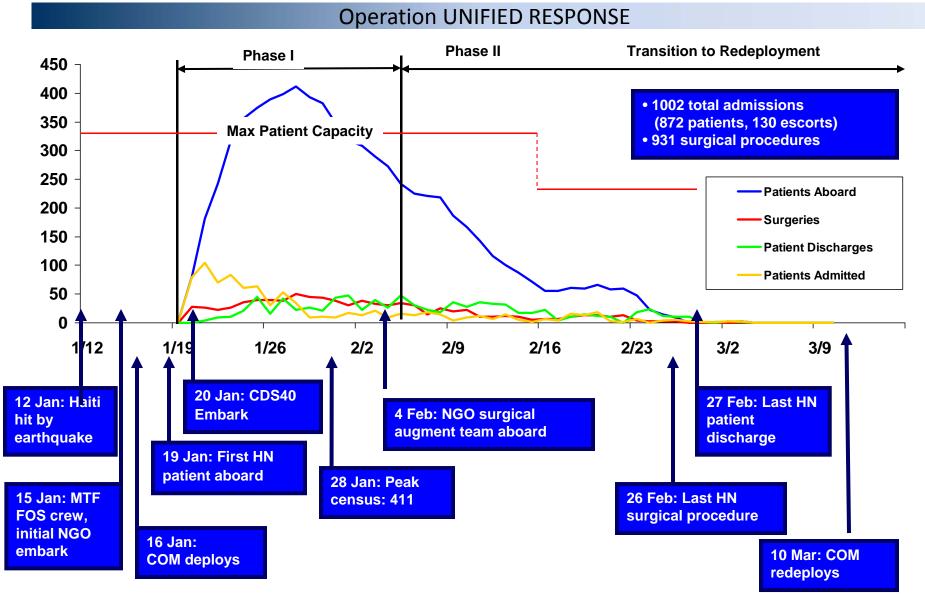


Maritime Laydown





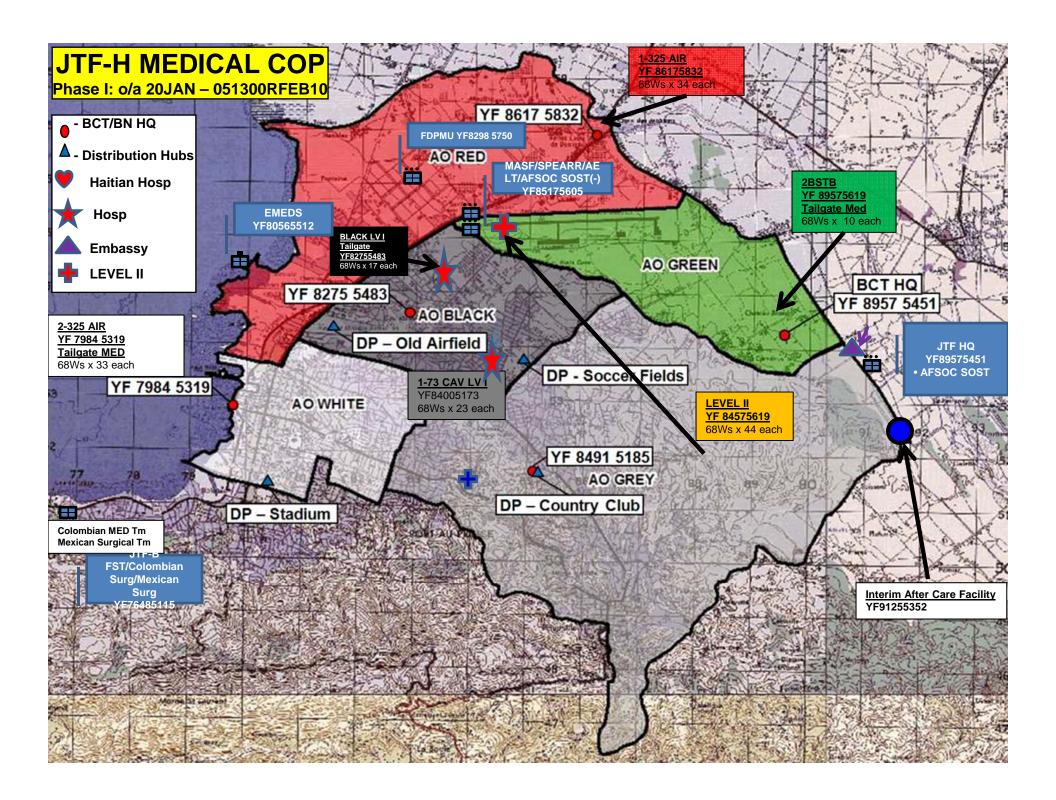
COMFORT Timeline





Land Based Medical Support







EMEDS Response

- Served as "Gate keeper"
- 10+ beds and 1 OR
- 300 patients and 200 escorts moved
- 125 inpatients rec'vd care





- 12 day trips
- Assisted 3 NGO's
- 1500 patients seen
- 4 tons medical supplies



Medical Logistics Support

Operation UNIFIED RESPONSE

Support to PROMESS Warehouse

- Logistics Advisory Team
- > Re-organized warehouse
- > Provided inventory mgmt
- > Teams at port to organize donations
- > Forklift support





Patient Movement Missions

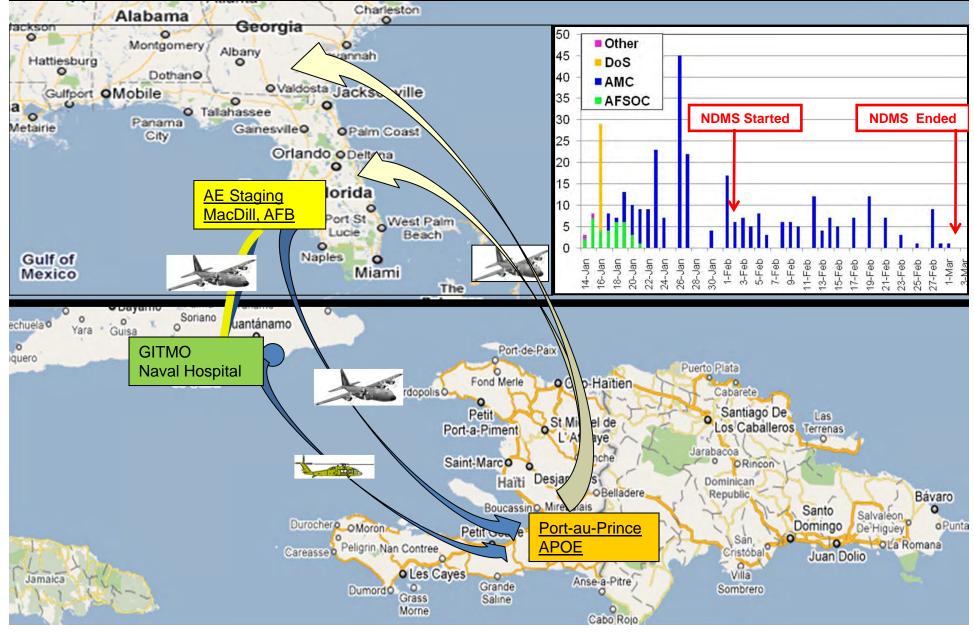
- Ground ambulance
- Rotary wing medevac
- Small boat medevac
- Evac to GTMO and CONUS





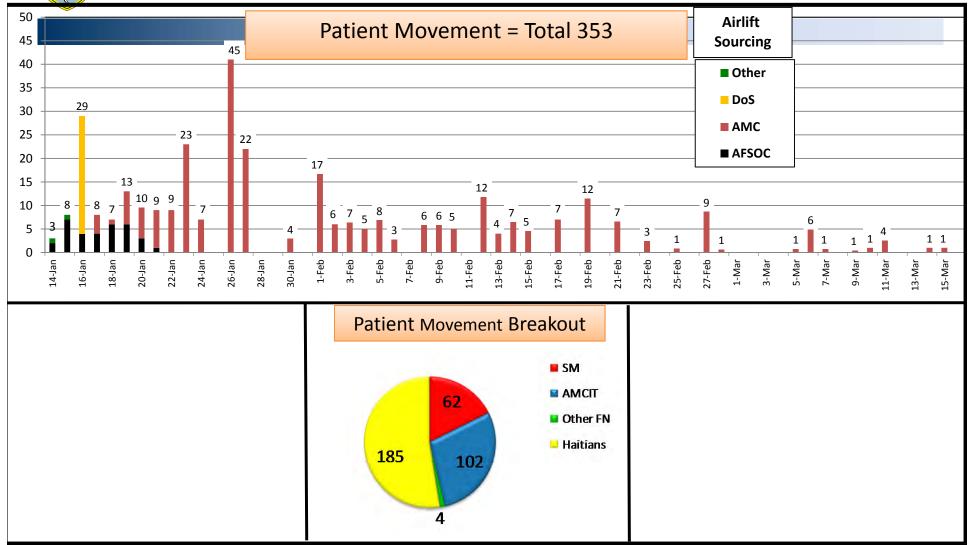


Patient Movement - CONUS





Contingency PM Report



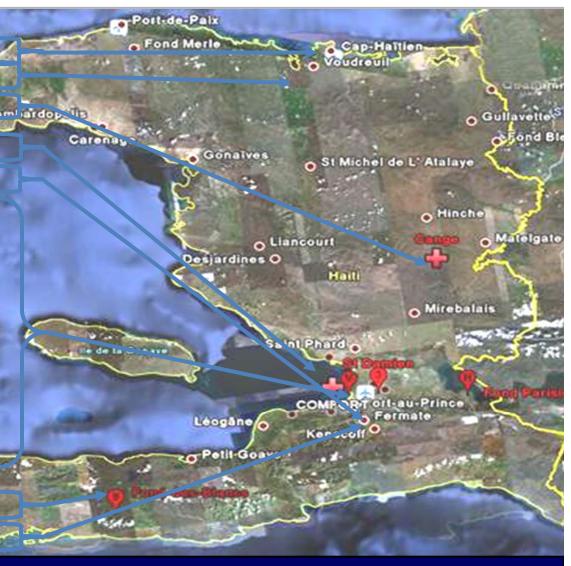
ISSUES:

- 1. Supporting DoD Haiti Patient Movement Requirements
- 2. Supporting DoD Chilean Patient Movement Requirements



Patient Outflow – within Haiti

	-	
Children of Promise**		
Sacred Heart**		
Partners in Health		
Real Hope for Haiti		
Love a Child	90	
Killick	9	
Terminal Varreux	360	
St. Damien's Children's Hospital**	30	
Heart Line	12	
Angel Missions	10	
Gheskio Hospital	1	
PIH / Double Harvest**	4	
Doctors without Borders	3	
Canadian Field Hospital	3	
St. Bonaface**	25	
Aerovac		



GoH / UN approved shore-based medical network provided placement of COMFORT patients for post-operative care



International Response

Operation UNIFIED RESPONSE

Medical Forces Afloat

- SPS CASTILLA
- ITN CAVOUR
- FRS SIROCCO
- ARM HUASTECO
- ARM TARRASCO
- ARM PAPALOAPAN
- ARC BUENAVENTURA
- ARC CARTAGENA DE INDIAS

Medical Forces Ashore

Canadian Field Hospital
China- Medical Rescue Team
Chile-Portable Hospitals
Japan- Medical team
Jordan - Field Hospital
Israel- Field Hospital
Spain- Medical Team



Russia- Mobile Hospital
Brazil- Field Hospital
Turkey- Field Hospital
France- Field Hospital
Venezuela- Medical Team
Cuba- Medical Team
Italy- Medical Team



AAR: What we did well

- Interagency Coordination Pre-crisis professional relationships and routine interagency coordination proved to be essential during the response.
- Collaboration and Synchronization (Strategic) The USSC SG daily TELECON provided vital situational awareness, identified critical issues, and assisted in assigning responsibility for actions.



AAR: What we did well

- Collaboration and Synchronization (Operational)
 USAID sponsored daily USG health meetings to
 pass information from UN Health Cluster and
 prioritize USG medical response.
- Operational Environmental Risk Surveillance.
 Forward Deployed Prev Med Unit (FDPMU) arrived early in deployment and was fully mission capable.



- Delay in USG and DoD Policy Concerning Evacuation of Haitian and Foreign Nationals
- Delay in Activation of NDMS Definitive Care Component and Non-Activation of NDMS Patient Movement (PM) Component
- Delay in establishing Medical ROE

- No designated medical rep on OFDA Disaster Assistance Response Team (DART)
- COMFORT not initially configured for FDR mission

- No Interagency Common Operating Picture
- JMEWS not used



Final Words of Wisdom

- Clearly define mission of DoD medical forces
- Maintain close coordination with OFDA
- Partner with NGO's and international community
- Collaborate, don't work in a vacuum
- Develop transition criteria and decision points



Unity of Effort At All Levels

